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FROM: Bruce D. Grant

DATE: December 10, 2003

Number of pages with cover page: 18

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Comments:

Application No.: 08/821,025 Filed: March 19, 1997
 Inventor: Hendrik Louis BIJL, et al.

Attorney Docket No. 251502006900

CONTENTS: Transmittal (1 page)**Fee Transmittal (1 page, in duplicate)****Terminal Disclaimer (1 page)****Petition for Extension of Time Under 37 CFR 1.136(a) (1 page)****Amendment in Response to Non-Final Office Action (12 pages)**

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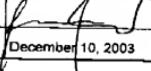
17

Application Number	08/21,025
Filing Date	March 19, 1997
First Named Inventor	Hendrik Louis BIJL
Art Unit	1651
Examiner Name	I. Marx
Attorney Docket Number	251502006900

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
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<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (Please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	MORRISON & FOERSTER LLP Bruce D. Grant - 47,806
Signature	
Date	December 10, 2003

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (703) 672-4306, on the date shown below.

Dated: 12/10/03 Signature: Judy Bridgwater (Judy Bridgwater)

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**FEE TRANSMITTAL
for FY 2004**

Effective 10/01/2003, Patient fees are subject to annual review.

Applicant claims small entity status. See 37 CFR 1.27	Examiner Name I. Marx
TOTAL AMOUNT OF PAYMENT	(\\$) 1,060.00
METHOD OF PAYMENT (check all that apply)	
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account <input type="checkbox"/> Deposit Account Number 03-1952 referencing 25152006900 <input type="checkbox"/> Deceal Account Number Morrison & Foerster LLP The Director is authorized to [check all that apply] <input checked="" type="checkbox"/> Charge deposit account <input type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fees (or any underpayments) of less than <input type="checkbox"/> Charge (less) indicated below, except for the filing fee to the above-identified deposit account	FEE CALCULATION (continued)
FEES	
1. BASIC FILING FEE	
Large Entity	Small Entity
Fee	Fee
Fee Code	Fee Code
(1)	(2)
Fee Description	
Fee Paid	
SUBTOTAL (1) (2) 0.00	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	
Extra Claims	Extra Claims
Fee	Fee
Fee Code	Fee Code
(3)	(4)
Fee Description	
Fee Paid	
SUBTOTAL (3) (4) 0.00	
** or number previously paid if greater. For Reissues, see above	
SUBMITTED BY	
Name (Print/Type) Bruce D. Grant	
Registration No. (Attorney/Agent) 47,608	
Telephone (856) 720-7962	
Signature 	
Date December 10, 2003	
3. ADDITIONAL FEES	
Large Entity	Small Entity
Fee	Fee
Fee Code	Fee Code
(5)	(6)
Fee Description	
Fee Paid	
SUBTOTAL (5) (6) 0.00	
4. OTHER FEES	
Large Entity	Small Entity
Fee	Fee
Fee Code	Fee Code
(7)	(8)
Fee Description	
Fee Paid	
SUBTOTAL (7) (8) 0.00	
5. TOTAL FILING FEE	
Large Entity	Small Entity
Fee	Fee
Fee Code	Fee Code
(9)	(10)
Fee Description	
Fee Paid	
SUBTOTAL (9) (10) 0.00	
6. EXAMINER'S FEES	
Large Entity	Small Entity
Fee	Fee
Fee Code	Fee Code
(11)	(12)
Fee Description	
Fee Paid	
SUBTOTAL (11) (12) 0.00	
7. PRACTICE EXPENSES	
Large Entity	Small Entity
Fee	Fee
Fee Code	Fee Code
(13)	(14)
Fee Description	
Fee Paid	
SUBTOTAL (13) (14) 0.00	
8. OTHER EXPENSES	
Large Entity	Small Entity
Fee	Fee
Fee Code	Fee Code
(15)	(16)
Fee Description	
Fee Paid	
SUBTOTAL (15) (16) 0.00	
9. TOTAL EXPENSES	
Large Entity	Small Entity
Fee	Fee
Fee Code	Fee Code
(17)	(18)
Fee Description	
Fee Paid	
SUBTOTAL (17) (18) 0.00	
10. TOTAL FEE PAID	
Large Entity	Small Entity
Fee	Fee
Fee Code	Fee Code
(19)	(20)
Fee Description	
Fee Paid	
SUBTOTAL (19) (20) 0.00	
11. FEE PAYMENT	
Method of Payment	
Filing Fee Paid	
Subtotal	
Other Fees Paid	
Subtotal	
Practice Expenses Paid	
Subtotal	
Other Expenses Paid	
Subtotal	
Total Paid	
Remaining Balance	

sd-175534

PAGE 3/18 * RCVD AT 12/10/2003 8:10:37 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-1/1 * DNIS:8729306 * CSID:858 720 5125 * DURATION (mm:ss):05:33